Approved for use through 7/31/2008. CHG 6651-0032

U.S. Peterd and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Riskletion Act of 1995, no persons are required to respond to a collection of information unless it displays a valid CMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Accidence podes Humber Substitute for Form PTO-878 CLAIMS AS FILED - PART ! OTHER THAN (Cotumn 1) (Column 2) SMALL ENTITY SMALL ENTITY FOR MUMBER FILED NUMBER EXTRA BASIC FEE RATE FEE' 07 OFR 1.16(4)) RATE Æ TOTAL CLAME OR (37.CFR (.16(c)) minus 20 = ENDEPENDENT CLAIMS X S OR (37 CF)R 1.18(b)) cotnus 3 o X S **OR** MULTIPLE DEPENDENT CLASH PRESENT 67 CFR 1.16(d)) OR ullet if the difference in column 1 is less than zero, enter ullet in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II (Column 1) (Cotumn 2) (Column 3) OTHER THAN OR SMALL ENTITY CLAIMS REMAINING HIGHEST NUMBER ⋖ SMALL ENTITY PRESENT ADOI-TIONAL RATE AFTER PREVIOUSLY EXTRA. RATE ADDI-WENDMENT PAID FOR TIONAL Total . Minus FEE FEE Ø OR Minus × 8200 -OR 6000 FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d)) OR +: TOTAL ADD'L FEE TOTAL OR ענו .עסט ADD'L FEE (Column 1) (Catumn 2) (Column 3) CLAIMS REMAINING ω HIGHEST PRESENT NUMBER AFTER AMENDMENT RATE ADDI-TIONAL PEE PREVIOUSLY PAID FOR EXTRA RATE ADDI: TIONAL Total GF OFR 1.10(-D) Minus FEE X S 衐 Independent (37 CFR 1.196)) OR OR X S FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(6)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Catumn 1) (Column 2) (Cotumn 3) CLAIMS HIGHEST REMAINING NUMBER PRESENT ADDI-TIONAL RATE AFTER RATE PREVIOUSLY EXTRA ADDI-TIONAL Total FEE Minus FEE Independent G7 CFR L1647 Ó OR OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (ST CFR 1.18(d)) OR TOTAL

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "7".

The Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1. Instruction of highest number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of highest number previously 77 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including patheting, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comment on the amount of time you require to complete this form ander suggestions for neducing this burden, should be sent to the Chief Information Office, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandria, VA 22313-1450.

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